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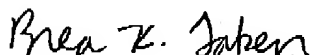
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August 16, 2004

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FROM: Brea K. Taken
DIRECT DIAL: (612) 607-7260
EMAIL: BTaken@oppenheimer.com
RE: U.S. Patent Application No. 09/445,043
Title: A CONTAINER CLOSURE
Filing Date: March 20, 2000
Art Unit: 3727
Attorney Docket No. 350013-65

COMMENTS: I hereby certify that an Associate Power of Attorney and a Response to Election/Restriction Requirement are being facsimile transmitted to the U.S. Patent and Trademark Office on August 16, 2004.



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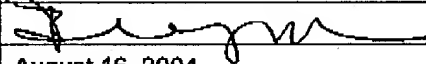
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/445,043
		Filing date	March 20, 2000
		First Named Inventor	Baird-Smith
		Art Unit	3727
		Examiner Name	Robin Annette Hylton
Total Number of Pages in This Submission	5	Attorney Docket Number	350013-65


ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Copy of the PTO Form 1533 (Rev. 9/97), Notice to File Missing Parts of Application <i>Filing Date Granted</i> <input type="checkbox"/> Executed Declaration and Power of Attorney Document	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal C (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) please identify below: Associate Power of Attorney
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